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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number. Attorney Docket Number **DECLARATION FOR UTILITY OR** First Named Inventor **DESIGN** ABHINAV AGGARWAL PATENT APPLICATION COMPLETE IF KNOWN (37 CFR 1.63) Application Number Filing Date Declaration Declaration Submitted OR Submitted after Initial Art Unit With Initial Filing (surcharge Filina

	requir	red)	Examiner	Name						
I hereby declare that:										
Each inventor's residence, mailing address, and citizenship are as stated below next to their name.										
I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:										
System and Method for Universal Identification of										
System and Method for Universal Identification of Biological Humans										
(Title of the Invention)										
the specification of which										
is attached hereto										
OR										
was filed on (MM/DD/	YYYY)		as Un	ited States App	lication N	umber or PC	T International			
Application Number		and was amended	on (MM/i	DD/YYYY) [(if applicable).			
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.										
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation.										
and the first of the mational ming date of the continuation-in-part application										
I hereby claim foreign priority benefits under 35 U.S.C. 119(a) (d) or (f) or 365(b) of any facility and the contract of the c										
inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant broader's rights and have also identified below, by checking the box, any foreign										
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Pri r Foreign Application Number(s)		Foreign Filing	Date	Priorit		Certified Co	py Attached?			
Numberis)	Country	(MM/DD/YYY	,	Not Clair		Yes				
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Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.										

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by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

DECLARATION — Utility or D sign Patent Application

Direct all correspondence to:	Custome	er Number:			OR >	Corres	pondence address below			
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.										
NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor										
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NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor										
Given Name (first and middle [if any])				Family Name or Surname						
Inventor's Signature	. .						Date			
Residence: City	State			Country		Citizenship				
Mailing Address										
City	State			ZIP Count			ry			
Additional inventors or a legal representative are being named on thesupplemental sheet(s) PTO/SB/02A or 02LR attached hereto.										